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Bib Data Sheet

CONFIRMATION NO. 1761

<b>SERIAL NUMBER</b> 10/529,108	<b>FILING OR 371(c) DATE</b> 09/12/2005 <b>RULE</b>	<b>CLASS</b> 030	<b>GROUP ART UNIT</b> 3700	<b>ATTORNEY DOCKET NO.</b> 51298-00004 US
<b>APPLICANTS</b> James C. Peacock III, San Carlos, CA; Nathan C. Maier, Hallsville, TX;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/30902 09/29/2003				
<b>** FOREIGN APPLICATIONS *****</b> UNITED STATES OF AMERICA 60414177 09/27/2002 UNITED STATES OF AMERICA 60459254 03/30/2003				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 23
<b>INDEPENDENT CLAIMS</b> 4				
<b>ADDRESS</b> 48423				
<b>TITLE</b> Implantable stent with modified ends				
<b>FILING FEE RECEIVED</b> 490	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	